

IKF PROMOTER - EVENT REGISTRATION FORM

This form must be submitted and approved prior to any event being granted the Sanctioning of the IKF. Thank you for applying to be an IKF Licensed Promoter. To make your event sanctioning request official, please Print Out the pages below, fill out and MAIL to the IKF to IKF, P.O. Box 1205, 9250 Cypress Street, Newcastle, CA, 95658, USA.



PLEASE INCLUDE IN YOUR MAILING

1. This form completed in full.
2. IKF Promoter License Fee of \$50.00 – *ONLY REQUIRED FOR FIRST IKF SANCTIONED EVENT*
3. Your IKF Sanctioning fee for this event you are applying for.
 - Please make out a "SEPARATE" check for both fees.
 - This form must be approved by the IKF prior to you advertising or announcing your event as an IKF Sanctioned event to anyone, anywhere.
 - (**) If your event is less then 35 days from this mailing, please note this on the top of this form when you mail it in with the understanding that If this form is not "IN" the IKF Office 35 days or more prior to your event your fees will increase as noted on the Sanctioning Fee Schedule page. Be aware that the IKF offers discounts for sanctioning fees paid 35 days or more prior to your event. When sending in this form, please check on the sanctioning fee page for the correct fee schedule that will equal your event. This page can be found at this web address on the IKF website; <http://www.ikfkickboxing.com/SancFEES.htm> - If you are unclear as to your fee to pay or have any other questions before sending your application in, please contact the IKF directly at (916) 663-2467. The proper fee should be sent in with this form to: IKF, P.O. Box 1205, 9250 Cypress Street, Newcastle, California, 95658, USA.

SECTION 1 - PROMOTER / EVENT INFORMATION

(* **NOTE:** Approved IKF Promoters who have sanctioned with the IKF within 6 months prior to this event do not need to fill out the section with an * next to it unless this information has changed.

PLEASE PRINT NEATLY

1. PROPOSED EVENT DATE: Month: _____ Date: _____ Year: _____
If actual date has not been set yet just write in TBA.
2. PROMOTERS NAME: _____ *DOB: M ____ /D ____ /Y _____
3. *RESIDENCE ADDRESS: _____
4. *CITY: _____ STATE/PROV: _____ ZIP: _____
5. *COUNTRY: _____
6. *PHONE: CELL: _____ BUSINESS: _____
7. *FAX: _____ EMAIL: _____
8. *PRESENT EMPLOYER: _____ HOW LONG? _____
9. *THREE PERSONAL REFERENCES: NAME, CITY, PHONE NUMBER
_____- _____ - _____
_____- _____ - _____
_____- _____ - _____
10. PROMOTIONAL COMPANY NAME: _____
11. *ADDRESS: _____
12. *CITY: _____ ST/PROV: _____ ZIP: _____ COUNTRY: _____
13. NAME OF EVENT: _____
14. EVENT LOCATION (Venue Name) : _____
15. CITY: _____ STPROV: _____ COUNTRY: _____
16. PHONE NUMBER ON WEB PAGE FOR CONTACT: (_____) _____ - _____
17. WEB SITE ADDRESS: www. _____
18. EVENT MATCHMAKERS NAME: _____
19. BOUT INFO
 1. Number of Proposed Amateur Bouts: _____ Number of Proposed Pro Bouts: _____
 2. Number of Proposed PRO Title Bouts If Any: _____ (Please List on a separate page If So)
 3. Number of Proposed AMATEUR Title Bouts If Any: _____ (Please List on a separate page If So)

SECTION 2 - EVENT OFFICIALS

1. IKF OFFICIALS "REQUESTED" BY PROMOTER

- All of your event officials will be assigned to your event by the **IKF**. All Certified IKF Officials can be found on the IKF Certified Officials Page. However, the **IKF** does allow you to "**REQUEST**" certain event Officials. However, the **IKF** cannot promise officials that you request will be appointed to your event. If you have certain officials you have seen work and would like to have them be appointed to your event, you may "**REQUEST**" them to work your event.
- **OFFICIALS FEES:** You will be required for all Officials Fees related to your event as noted on the IKF Officials Fees Page as well as your **IKF** Event Representative Fees as noted on the IKF Event Representative page. **If you do not have any "Requested" IKF Officials please write "As Appointed By IKF"**
 - **IKF REPRESENTATIVE REQUESTED**
▪ _____
 - **IKF REFEREE(S) REQUESTED**
▪ _____
 - **IKF JUDGES REQUESTED**
▪ _____
 - **IKF TIMEKEEPER REQUESTED**
▪ _____

2. NON CERTIFIED IKF OFFICIALS "REQUESTED" BY PROMOTER

- If you have previously sanctioned your events with another sanctioning body, and like certain officials from that organization, you can "**REQUEST**" them to work your **IKF** Sanctioned event **PROVIDED** they or you can show proof that they have been Trained and/or Certified through another "*Legitimate*" Sanctioning body. All they would need to do is register as an **IKF** Event Official. The **IKF** cannot promise that these officials will be appointed to your event but can inform you of their accepted status prior to your event. The only individual that would need sole **IKF** Certification would be your event Representative. Please include on an additional paper if necessary.
- **NON IKF LICENSED/CERTIFIED REFEREE(S) REQUESTED:** _____
 - What Sanctioning Body Have They Worked For: _____
 - Last Event They were a REFEREE At & Where: _____
- **NON IKF LICENSED/CERTIFIED JUDGES REQUESTED:** _____
 - What Sanctioning Body Have They Worked For: _____
 - Last Event They were a JUDGE At & Where: _____
- **NON IKF LICENSED/CERTIFIED TIMEKEEPER REQUESTED:** _____
 - What Sanctioning Body Have They Worked For: _____
 - Last Event They were a TIMEKEEPER At & Where: _____

3. PROMOTER'S HIRED MEDICAL "DOCTOR(S)"

- _____
- _____
- Have they ever been a ringside fight DOCTOR for an IKF Event? Answer Yes or No: _____
- When and where: _____
- If no, have they ever been a ringside fight DOCTOR? Answer Yes or No: _____
- Are they/he/she qualified/certified for TRAUMA Emergencies? Answer Yes or No: _____

SECTION 3 - EVENT EQUIPMENT

• EQUIPMENT

- What BRAND NAME of Gloves are you using on your event: _____
 - Are these Gloves IKF Approved? _____
 - (*) The IKF Must approve the actual BRAND NAME of Fight Gloves you will be using for your event.
- What BRAND NAME Fighting ring are you using? _____
- Are all the ring dimensions (20' x 20' Minimum) IKF Approved? _____

SECTION 4 – INSURANCE

The Below Information & Requirements Will Be Required Of You To Be Faxed (916-663-4510) Or Mailed To The IKF Headquarters to be received here Within 7 Days Prior To Your Event If Approved. UNLESS YOU ALREADY HAVE THIS INFO, For now, these answers may be left blank until you provide this information to the IKF prior to your event.

INSURANCE INFO - CONTINUED

- IKF MUST BE LISTED as an Additional Insured on "ALL" your Insurance Policies
 - **SUGGESTED** insurance company of the IKF is **FL Dean – Please See: www.ikfkickboxing.com/SanctionINS.htm**

What Company is Covering Your Fighters Medical Coverage: _____

- **MANDATORY** minimum coverage of \$2,500.00 in **FIGHTER MEDICAL INSURANCE. Some States Require More.**
 - Contact At Company: _____
 - Coverage amounts: _____
 - Policy Number: _____
- IKF Needs To Be listed As a Secondary Insured on Your **VENUE LIABILITY**
 - Contact At Company: _____
 - Coverage amounts: _____
 - Policy Number: _____

SECTION 5 - SANCTIONING FEES & PROMOTER AGREEMENT

BELOW IS REQUIRED OF YOU IN THIS MAILING

- THIS FORM FILLED OUT IN FULL
- IKF SANCTIONING FEE INFO
 - **NEW – FIRST TIME IKF PROMOTER**
 - 1 Time Application Fee Of \$50.00 US Payable To IKF.
 - Total Amount Paying For General Event Sanctioning Fee: \$ _____
 - If ANY: Total Amount Paying For TITLE Sanctioning Fees: \$ _____
 - If ANY: Total Amount Paying For Title "BELTS": \$ _____
 - **TOTAL AMOUNT PAYING TO IKF FOR ALL FEES:** \$ _____

PROMOTER AGREEMENT - PLEASE INITIAL EACH ITEM

- ____ Promoter has read and agrees to all requirements of IKF Sanctioning.
- ____ Promoter has read and agrees to all requirements of IKF Representative.
- ____ Promoter has read and agrees to IKF Ringside Rules & Regulations.

Promoter AGREES to the Following as MANDATORY Requirements of IKF Sanctioning

Include in ALL Event advertisements, print, audio and TV the following:

- ____ PRINT ADS/Posters/Fliers/Event Program: IT MUST CLEARLY SAY on your ad that this is an IKF SANCTIONED EVENT AND INCLUDE The IKF Sanctioning Logo placed in the upper left or upper right corner of your ad.
- ____ Audio & or TV: the following shall always be included in and audio or TV advertisement voiced as: **"This event is Sanctioned by the IKF, for more info go to IKFKickboxing.com."**
- ____ A copy of any and all of the above materials must be sent to IKF Headquarters prior to your event. If materials are not received by the IKF a minimum 10 days prior to your event, the IKF Sanctioning for your event will be cancelled.

A MINIMUM 5 DAYS PRIOR TO YOUR EVENT

- ____ Send a full list of the proposed scheduled bouts to the **IKF**. If the proposed bout schedule is not received by the **IKF** a minimum of 5 days prior to your event, the **IKF** Sanctioning for your event will be cancelled and you will be fined \$500.00.
- ____ Promoter must "E-Mail" to the **IKF** "ALL" fighters names as they would appear in the **IKF** Rankings, the result of their bout and who they fought. Not doing so will suspend said promoter from any future **IKF** Sanctioned events and a fine of \$500.00 must be paid before re-approved as an **IKF** Promoter.

WITHIN 7 DAYS AFTER YOUR EVENT

- ____ For official record **YOU MUST** Film your event: Minimum of VHS or DVD. Once done, you will send to the **IKF** the "BEST" quality video footage of the event within 7 days of event. Not doing so will suspend said promoter from any future IKF Sanctioned events and a fine of \$500.00 must be paid before re-approved as an IKF Promoter.

CO-SANCTIONED EVENT

If your event is co-sanctioned with another kickboxing sanctioning body See: www.ikfkickboxing.com/SanctionCO.htm
Promoter agrees to all noted items of this Sanctioning Contract above and all information provided above is true and correct and said promoter proves so by signing and printing his name below.

Chief Promoters Printed Name: _____ Date: ____/____/____

Chief Promoters Signature: _____ Date: ____/____/____